TECHNICAL MANUSCRIPT REVIEW FORM*

Title/Draft No. PCB Exposure Estimation Tool, Version 2.0		Author(s) Linda Phillips		
Date Review Requested 5/16/19	Date Review Required 6/10/19	Project Officer/Organization/Address ORD/NCEA		
Type of Publication/Audience		Reviewer/Organization/Address Geniece Lehmann, NCEA-RTP		
Review coordinator (e.g., PO, TIM, Supervisor) Linda Phillips				
You are asked to review and commen document entitled: Systematic Review Evaluating PCBs in Indoor School Air Tool and ELEs, and the process used please notify the Review Coordinator	is also being provide to undate them. If w	B Exposure Estimated as background in	nation Tool and the Exposi nformation on the PCB Ex	ure Levels for oposure Estimation
SUMMARY RATING			RECOMME	
Please rate the manuscript as follows:	Satisfactory	Unsatisfactory	_X_ (1) Acceptable as i	s
Content and scope	X	***************************************	(2) Acceptable after	minor revision
Organization and presentation	X	***************************************	(3) Acceptable after	major revision
Quality of data and validity of analytical	X		(4) Not acceptable	
techniques	X	***************************************	If you have checked either 3 or 4, please specifically state reason(s) in the comments space below.	
Soundness of conclusions	X			***************************************
Editorial quality	X	***************************************	Please indicate whether does not have policy im	the Tool does or plications.
Other (specify)				
Comments: (Use extra sheets if needed.) NOTES: Excellent work updating a valuable Agency resource The signed review form should be returned to the Review Coordinator even if there are no comments.			Yerre M. William	6/4/2019 Wu
			Reviewer's name Date	
				Date
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